

SPECIAL ABSENTEE BALLOT APPLICATION

(Please print all information)

1. Name: _____ 2. Date of Birth: _____
First Name Middle Name or Initial Last Name Month / Day / Year

3. Residence Address in Orange County:

Number and Street (PO Box, Rural Route, etc. not acceptable) (Designate N, S, E, W if used) City Zip Code

4. E-mail Address: _____

5. Mailing Address: _____

Street or PO Box

City State Zip Code
Country

6. Reason for Special Absentee Ballot (please check one):

- ☐ Member of armed forces serving overseas. ☐ Spouse or dependent of member of armed forces serving overseas.
☐ U.S. citizen temporarily residing outside U.S. ☐ U.S. citizen overseas by virtue of employment or dependent.

7. ☐ I am not presently affiliated with any political party. However, for the primary election only, I request an absentee ballot for the _____ Party.

Please print out this application, complete it and mail it to:

Registrar of Voters

County of Orange

P.O. Box 11298

Santa Ana, CA 92711-9990

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT THE PROPER SIGNATURE OF THE APPLICANT.

Signature _____ Date _____